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§15–130.1.

- (a) The Department shall apply to the Centers for Medicare and Medicaid Services of the federal Department of Health and Human Services for a psychiatric residential treatment demonstration waiver if the Centers announce in the Federal Register that the Centers are accepting applications for such a waiver.
 - (b) The waiver application required by subsection (a) of this section shall:
 - (1) Provide for services for a minimum of 150 individuals; or
- (2) Provide for services for the maximum number of individuals that the Centers for Medicare and Medicaid Services allows, if the maximum number of individuals that the Centers allow to receive services under the waiver is fewer than 150 individuals.
- (c) During the waiver application process, the Department shall conduct an analysis of both the short-term and long-term costs and benefits of implementing the waiver.
- (d) The Department shall report to the General Assembly, in accordance with § 2-1257 of the State Government Article, every 6 months concerning the status of the Department's application required under this section until the waiver is approved or denied.
- (e) (1) If the Centers for Medicare and Medicaid Services approve the waiver application required under this section, the Department shall report to the General Assembly, in accordance with § 2-1257 of the State Government Article, on its decision on whether to implement the waiver.
- (2) The report required under this subsection shall include a summary of the analysis required under subsection (c) of this section.

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